

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID #	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		47	2/1/02
FORMALITY REVIEW		503-227	02-20-01
RESPONSE FORMALITY REVIEW	ph	1030	5-31-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	2/14/02
2	4/11/02
3	4/17/02
4	7/29/02
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If more than 150 claims or 10 actions  
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